The New England

Journal of Medicine

VOLUME 202

JANUARY 9, 1930

Number 2

THE INSTITUTE OF HUMAN RELATIONS AT YALE UNIVERSITY*

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I. HISTORY OF THE INSTITUTE

QUARTER of a century ago the medical student's formal training in psychiatry seldom consisted of more than occasional visits to insane asylums. What the student saw there indicated such small possibilities of doing anything constructive for the insane, and so filled him with horror, that only the rare exception was willing to pursue further the subject of mental disease.

Yet, psychiatry was taught, even though it was not included by that name in the curriculum. Students learned from the example of the great clinical masters to approach the patient in a manner which imbued the latter with confidence and an optimistic outlook on life. Some may say that this was not psychiatry because the patients were for the most part simply persons suffering from various kinds of physical disability, but we now recognize the attitude of these older physicians as one that is essential from the psychiatric point of view.

A considerable period of time elapsed before much conscious thought was given to the development of psychiatry as a part of medicine. During this period, from 1905 to 1920, great changes were taking place, however, in other fields. Chemical and physical laboratories for the scientific study of the human organism sprang up in connection with the clinical work in good schools all over the country. Specialization became the vogue. So much knowledge was gained concerning minute phases of medicine that men could with difficulty keep abreast of progress even in a single, narrow branch. Medical students and physicians developed the habit of looking at patients from the point of view of a particular interest, such as the heart, the lungs, or the digestive processes. Few thought of the patient as an individual. Instead of producing doctors for the whole man, medical schools began to turn out doctors for fractions of a man.

After the War, when the Yale School of Medicine considered bringing psychiatry into the curriculum, it was agreed that a major purpose should be the restoration to medicine generally of the humanitarian viewpoint which enabled

*An address before the Massachusetts Psychiatric Society, at Boston, October 30, 1929.

the old-fashioned doctor to carry away the family troubles in his unsanitary black bag.

A conclusion was reached that something might be accomplished by establishing a small psychopathic hospital, in conjunction with the general hospital, for the study of end products of mental derangement. It was felt that this might be a stepping stone toward the ultimate goal because it would result in a closer relationship between the psychiatrists and the physicians and students. It would also tend to promote an interest in evaluating the safety factor in the mental economy of general hospital patients.

Experience in other fields of medicine indicated the limited value of curative methods and the much greater importance of prevention. Why should not the principles of preventive medicine apply as well to the mind as to the body?

The idea was not original. The mental hygiene movement was attracting general atten-When a series of lectures on mental hygiene was given at Yale University, a hall large enough for all who wanted to come could not be found. This situation is easily explained by the fact that on the average one out of every two persons has in his family a mental problem. This is simply further proof that it is not only the insane and the partly insane who are in need of help. Mentally normal and even supernormal individuals deserve attention, from the point of view not only of preventing derangement, but also for the sake of making them more efficient and happy.

While the School of Medicine was working on this program the University was faced with the need of a psychiatrist to deal with problems of behavior that are bound to arise in a student body of 5,000 young men. The Connecticut Society for Mental Hygiene was also seeking a psychiatrist. The suggestion was made and adopted that a plan be worked out to meet the need of all three groups. To this end a program was drawn up. The funds necessary for this program and for the maintenance of a few patients were then sought and obtained.

Fortunately it was possible to secure the services of Dr. Arthur H. Ruggles in starting the work. It soon became evident that the establishment of a psychopathic hospital, modeled on several already in existence, would not constitwinternitz—Dean, Yale University School of Medicine. For record and address of author see "This Week's Issue," page 87.

ing the sane and the supersane as well as the insane. Questions that needed answering were, Upon what does behavior depend?, What are the basic things upon which the understanding of behavior rests? Are there valuable resources at hand for the studies that should be made?

The School of Medicine of course had much to offer, for the mind must be studied in relation to the physical organism as a whole. However, the divisions concerned with the nervous system needed to be strengthened. There were also at hand other University divisions interested in the physiology of the nervous system—namely, the department of psychology and the institute of psychology. There was also a well-organized division for the study of child development. These various divisions were located in different parts of the city, and it seemed possible that they might wish to know each other better.

Consideration of these resources resulted in the idea of an institute of human behavior, for drawing together the work in the fundamental studies of the human organism, the mental hygiene activities, and the various psychological interests. The plan that was proposed called for a building to include among other facilities a few beds for individuals whose behavior the institute would study. The staff was not to confine itself to these but was to serve in the Dispensary and Hospital as well, and was to attempt to impress upon the medical student the importance of the psychic aspects of behavior.

The idea involved in this plan, proposed five years ago, has been fruitful not only at Yale, but elsewhere. Psychiatrists are more and more being offered the opportunity to study the reactions of patients in the wards and dispensaries of general hospitals. However, the plan itself could not be carried out in full at Yale because the available funds were insufficient for elaborating it to any extent.

In the meantime another significant development took place in the University. The Dean of the Law School, who as Secretary of the University, had been associated with the attempt to secure a psychiatrist for the student body, indicated a keen interest in the study of the causes underlying infractions of the law and the basis of its administration. He added to his staff a sociologist, a psychologist, and later an economist. This approach seemed to have much in common with the psychiatry program. Acknowledgment of the fact that the individual can not be studied as a psycho-physical organism unless he is also considered as a member of society, and that he can not be understood as a member of society unless he is studied as an individual, led to a joint program for the study of man.

This enlarged plan involved the establishment of a center, to be called the Institute of Human Relations. Here would be represented the fundamental biological and sociological sciences, flanked on one hand by such applied fields of biology as medicine, public health, and nursing,

and on the other hand by such applied fields of sociology as law, business, industry, engineering, and religion.

This plan met with enthusiastic approval from the groups concerned and from organizations with funds at their disposal for educational purposes, with the result that the funds essential for launching the Institute project were obtained.

Facilities already available in the vicinity are not to be duplicated in the Institute building. The fundamental biological sciences, for instance, are already well established in the Medical School, except that there are no quarters for psychiatry. These are therefore to be provided in the Institute building. There will be fifty beds for individuals who will be considered guests of the Institute. Some of the rooms will be in suites with gardens attached, and every modern convenience, so that the normal activities of the individual will be interrupted to a minimal extent. The beds will be endowed as far as necessary in order that guests will not have to remunerate the Institute.

The guests will be selected from all walks of life. Some may be brought there because it is not desirable that they should be at liberty, and others may be selected from the general wards of the hospital simply because of better opportunities in the Institute for studying their problems. They may be referred from the outpatient department, from the juvenile court or from the criminal court, or they may come of their own accord. No one will come there against his wishes. All will be guests not only of the psychiatrist but also of the psychologist and sociologist.

In connection with these fifty guest chambers various recreational facilities and laboratories for making possible the measurement of subjective reactions by methods that have been successfully used in medicine, psychology, and industry will be provided. It is hoped that no work will be done in the Institute resting entirely on philosophical or hypothetical and non-measurable bases.

The building will also contain extensive laboratories for psychology, representing many of its specialties. Comparative psychology including comparative psychobiology, the study of the higher anthropoids, will remain in its present location for the time being, but the tropical breeding station now being built in Florida should greatly increase the opportunity in this field.

The Child Development Research Unit is to be housed in a wing of the Institute building, where the architectural scheme is designed to make an agreeable impression upon the child and his family. A limited number of children will be studied here intensively, but a very much wider investigation involving day nurseries and public schools will probably result from the work in this unit.

Sociology as well as psychology will be housed.

in the Institute building. The staff in sociology will be a fairly large one, and the effort will be made to bring out the sociological implications in every study in such a manner that results in different fields may be co-ördinated and compared.

II. EDUCATIONAL POLICIES INVOLVED

That, in a general way, is the history of the Institute of Human Relations. In considering the philosophy back of it, we must ask ourselves what is the object of life. Perhaps we can agree that the goal is human happiness, or, phrasing it differently, the greatest good to the greatest number. This object has been lost sight of in our recent rapid scientific progress. Things which should be a means to human happiness and usefulness have wrongly become ends in themselves.

Chemistry, physics, and other branches of science are important in themselves, but far more significant from the point of view of what they may contribute to human welfare. In order to realize their full significance and potentialities in this respect, the barriers between them must be broken down, and knowledge as a whole must be articulated.

Let us consider the steps which the Medical School can take in this direction. Generally speaking, the student of medicine today decides he is going to be a doctor before he knows what medicine is. He must do this, because it is necessary to pursue intensively for two years in college the subjects which are supposed to be pertinent to medicine. For some individuals going into medicine these subjects are more pertinent than for others. After two years of study he goes to a medical school and deals for a period of similar length with inanimate life, with test tubes, cadavers, guinea pigs, dogs, etc. There is nothing to help him get a humanitarian point of view. There is no reason why he should consider the patient as anything more than the subject for some technical procedure.

I do not believe that it is at all essential that the medical curriculum should be as drawn out as it is. I am certain that the knowledge that most doctors have of bio-chemistry and other fundamental sciences could have been given in a very much more concise and effective way than is usually the case. It cannot be expected that the student should know as much about each subject as the respective teachers know. The medical course should be cut down materially so that time will be allowed the student to perfect himself in the particular phases of medicine in which he is most interested.

At Yale, the plan is that during the prelimi- as a social mechanism.

nary years, before the student enters the clinic. he must get the fundamentals of the sociological sciences. This does not mean a series of lectures on theory, but a study of actual cases which will bring out the underlying principles of sociology. After the student has been exposed for two years to conditions as they actually exist in real life, while he has also been studying the principles of biology, he will go into the clinic. Here he will continue to study the psychological and sociological history of the patient at the same time that he is dealing with problems of physical health. In each of these three phases of work he will be under the direction of thoroughly qualified men of equal standing. Thus, no matter what his particular interest, the student will learn how to evaluate and interpret the patient as a human being.

Certainly the student will not become perfect in all of the fields which he must consider, but he will know enough to call in experts when they are needed, just as the internist today knows when to call on the surgeon.

The information gathered in the biological, sociological, and psychological examinations of patients will be used in the Institute of Human Relations in connection with other studies concerning the same group of individuals. Thus the investigation of the bankrupt retailer will not end with the court analysis, but will look into the physical, psychological, psychiatric, and social history of the individual. The same data will be used in surveys of delinquency, divorce, tuberculosis, etc. Thus, eventually, exact information from many angles will be gained concerning different primary problems and these will serve as controls against each other.

The University is now engaged in developing the department of psychiatry and mental hygiene. It aims to gather together a group of trained men, of more or less equal standing in the organization, representing many of the different aspects of the study of the mind, but interested in evaluating their different approaches from the point of view of the individual as a whole.

Every effort is being made to simplify the biological approach to the problems of conduct so that the lawyer may have some background in this respect. The effort will also be made to give the medical student an appreciation of the legal approach. Students representing such varied interests as law, medicine, and pure science, will rub elbows with one another. Through such contacts, fostered by the Institute, it is hoped that doctors will evolve who know man not only as a biological and psychic mechanism, but also as a social mechanism.